

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	KH	7059	11/17
O.I.P.E. CLASSIFIER		48	11/19/99
FORMALITY REVIEW	SH	60245	12/8/99

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date											
Final	Original	9	3	4	12	8	12	9				
25	12	3	21	4	31	16						
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Claim	Date											
Final	Original	9	3	4	12	8	12	9				
24	51	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
25	52	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
26	53	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
27	54	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
28	55	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
29	56	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
30	57	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
31	58	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
32	59	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
33	60	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
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Claim	Date											
Final	Original	9	3	4	12	8	12	9				
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If more than 150 claims or 10 actions
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